

# CONTRACT AWARD SHEET DEPARTMENT OF PROCUREMENT MANAGEMENT

Bid No. 8043-4/11-4

Award Sheet

DIVISION

BID NO.:	8043-4/11-4	PREVIOUS BID NO.:
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TITLE: **VARIOUS FOOD ITEMS - PREQUALIFICATION** 

CURRENT CONTRACT PERIOD: 01/01/2011 through 12/31/2011

Total # of OTRs:

# **MODIFICATION HISTORY**

	Bid No. 8043-4/11-4	Award Sheet	
	DPM I	Notes .	
LIVING WAGE: No OTHER APPLICABLE ORDINA	APPLICABLE O  UAP: Yes  ANCES:	RDINANCES IG: No	
CONTRACT AWARD INFORM  No Local Preference Small Business Enterprise (SBE) Miscellaneous:  REQU	ATION:  No Micro Enterprise PTP Funds  ISITION NO.:	Full Federal Funding Partial Federal Funding	No Performance Bond No Insurance
PROCUREMENT AGENT: PHONE: 305 375-4263	TOURIZ, ALBERT FAX:	EMAIL: ATOURIZ@	)MIAMIDADE.GOV

VENDOR NAME: PEAS & CARROT CATERING INC

DBA: CONTINENTAL CATERING

FEIN: 200122741 SUFFIX: 01 33418

STREET: 4521 PGA BLVD # 348 CITY: PALM BEACH GARDENS ST: FL ZIP:

FOB\_TERMS: DEST-P DELIVERY:
PAYMENT TERMS: NET30 TOLL PHONE:

<u>VENDOR INFORMATION:</u>

CERTIFIED VENDOR

ASSIGNED MEASURES

Local Vendor: SBE Set Aside Bid Pref.

Micro Ent. Selection Factor Goal

Other: Vendor Record Verified?

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#### Vendor Contacts:

Name	Phone1	Phone2	Fax	Email Address
RANDY S EPSTEIN	561-355-1081	-	561-355-1082	RANDY@CONTINENTALCATERINGIN(

VENDOR NAME: STEVES PIZZA WEST INC

DBA:

FEIN: 320036874 SUFFIX: 01 33196

STREET: 16285 SW 88TH STREET CITY: MIAMI ST: FL ZIP:

FOB TERMS: DEST-P DELIVERY:

PAYMENT TERMS: NET30 TOLL PHONE: -

<u>VENDOR INFORMATION:</u>

CERTIFIED VENDOR

ASSIGNED MEASURES

Local Vendor: SBE Set Aside Bid Pref.

Micro Ent. Selection Factor Goal

Other: Vendor Record Verified?

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## Vendor Contacts:

Name	Phone1	Phone2	Fax	Email Address
HYMAN STORCH	305-388-5552	-	305-388-2202	BIGAGE@AOL.COM

VENDOR NAME: INNOTECH PRODUCTS LTD

DBA: HEATERMEALS

FEIN: 331015493 SUFFIX: 01 45246

STREET: 311 NORTHLAND BLVD CITY: CINCINNATI ST: OH ZIP:

FOB TERMS: DEST-P DELIVERY:

PAYMENT TERMS: NET30 TOLL PHONE: 800-503-4483

VENDOR INFORMATION:

CERTIFIED VENDOR

ASSIGNED MEASURES

Local Vendor:

SBE Set Aside Bid Pref.
Micro Ent. Selection Factor Goal

Other: Vendor Record Verified?

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**Vendor Contacts:** 

NamePhone1Phone2FaxEmail AddressDAVE BLANDFORD513-772-3066800-503-4483513-772-3269INFO@HEATERMEALS.COM

VENDOR NAME: JEWISH COMMUNITY SERVICES OF SO FLA INC

DBA:

FEIN: 590637867 SUFFIX: 01 33161

STREET: 735 NE 125 ST CITY: NORTH MIAMI ST: FL ZIP:

FOB\_TERMS: DEST-P DELIVERY:
PAYMENT TERMS: NET30 TOLL PHONE:

VENDOR INFORMATION:

CERTIFIED VENDOR

ASSIGNED MEASURES

Local Vendor: SBE Set Aside Bid Pref.

Micro Ent. Selection Factor Goal

Other: Vendor Record Verified?

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**Vendor Contacts:** 

 Name
 Phone1
 Phone2
 Fax
 Email Address

 EVE MART
 305-899-1587
 305-899-8728
 EMART@JCSFL.ORG

VENDOR NAME: GREATER MIAMI CATERERS INC

DBA:

FEIN: 591209174 SUFFIX: 01 33142

STREET: 4001 NW 31 AVE CITY: MIAMI ST: FL ZIP:

FOB\_TERMS: DEST-P DELIVERY:
PAYMENT TERMS: NET30 TOLL PHONE:

VENDOR INFORMATION:

Local Vendor:

CERTIFIED VENDOR ASSIGNED MEASURES

SBE Set Aside Bid Pref.

Micro Ent. Selection Factor Goal

Other: Vendor Record Verified?

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**Vendor Contacts:** 

NamePhone1Phone2FaxEmail AddressJOHN OLMO - VICE PRE305-633-4616-305-635-5202JOLMO@GMCATER.COM

VENDOR NAME: CAFFE CAPPUCCINO INC

DBA: CATERING THE EVENT

FEIN: 650291894 SUFFIX: 02 33178

STREET: 6335 NW 99TH AVENUE CITY: DORAL ST: FL ZIP:

FOB TERMS: DEST-P

PAYMENT TERMS: NET30 TOLL PHONE: 877-642-2837

VENDOR INFORMATION:

CERTIFIED VENDOR ASSIGNED MEASURES

Local Vendor: SBE Set Aside Bid Pref.

Micro Ent. Selection Factor Goal

Other: Vendor Record Verified?

DELIVERY:

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**Vendor Contacts:** 

Name	Phone1	Phone2	Fax	Email Address
SUSAN R BLEEMER	305-593-2233	877-642-2837	305-599-1119	CAFFE@CATERINGTHEEVENT.COM

VENDOR NAME: LONG LIFE FOOD DEPOT LLC

DBA:

FEIN: 770687868 SUFFIX: 01 47374

STREET: 1326 NW 5TH STREET CITY: RICHMOND ST: IN ZIP:

FOB\_TERMS: DEST-P DELIVERY:

PAYMENT TERMS: NET30 TOLL PHONE: 800-601-2833

VENDOR INFORMATION:

Local Vendor:

CERTIFIED VENDOR ASSIGNED MEASURES

SBE Set Aside Bid Pref.

Micro Ent. Selection Factor Goal

Other: Vendor Record Verified?

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**Vendor Contacts:** 

Name	Phone1	Phone2	Fax	Email Address
JIM WILSON	765-939-0110	800-601-2833	765-939-0065	JWILSON@LONGLIFEFOOD.COM

ITEMS AWARDED Section:

**Details:** 

<u>Item # Description</u> <u>Oty Unit Price</u>

**End of ITEMS AWARDED Section** 

**AWARD INFORMATION Section** 

BCC Award: No DPM Award: No BCC Date: DPM Date: 09/15/2010

**Contract Amount:** \$ 321,500.00

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Additional Items Allowed:		Agenda Item No.:	
Special Conditions:			
These vendors are pre-qualified	to participate in subsequent spo	t market emergency purchases as required	
by the County on either an as-ne	eded or on a periodic		
basis. The award to one vendor	or a specific period or individua	al action does not	
preclude the remaining pre-qual	ified vendors from submitting o	ffers for other specific	

### RPO INFORMATION Section:

purchases. Under this contract geographic location and delivery will be taken into

consideration on the award.

	BRO INFORMATION S	ection.					
BPO ID :	ABCW1100193						
	Commodities Info Department Info						
Code	Description	Department Id	<b>Dollar Allocations</b>				
961-15	CONCESSION SERVICES, CATERING SERVICES,	EH*****	\$5,000.00				
		JU*****	\$5,000.00				
		MT*****	\$120,000.00				
		PD*****	\$100,000.00				
		PM*****	\$4,000.00				
		PW*****	\$60,000.00				
		SW*****	\$20,000.00				
		BN*****	\$7,500.00				
	End of BPO Information Section						